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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



Applicant(s): Mauro et al.  
Serial No.: 10/003,915  
For: CATAMENIAL DEVICE  
Filed: November 2, 2001  
Examiner: Catharine L. Anderson  
Art Unit: 3761  
Confirmation No.: 7768  
Customer No.: 27,623

Attorney Docket No.: 460.2115USU

**Mail Stop AF  
COMMISSIONER FOR PATENTS  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Dear Sir:

REQUEST FOR RECONSIDERATION TRANSMITTAL

We are enclosing a Request for Reconsideration in response to the communication dated October 6, 2005 in the above-identified application.

Petition for extension of time pursuant to 37 C.F.R. §§ 1.136 and 1.137 is hereby made if, and to the extent, required. The fee for this extension of time is calculated to be \$ \_\_\_\_\_ to extend the time for filing this response until \_\_\_\_\_.

The fee for any change in number of claims has been calculated as shown below.

CLAIMS AS AMENDED						
	Claims Remaining After Amendment		Highest Number Previously Paid	Present Extra	Rate	
Total Claims	28	Minus	38	0	x \$50.00	\$0
Independent Claims	2	Minus	3	0	x \$200.00	\$0
MULTIPLE DEPENDENT CLAIM FEE						x \$360.00 = \$0
TOTAL FEE FOR CLAIM CHANGES						\$0
1/2 FILING FEE FOR SMALL ENTITY						\$N/A

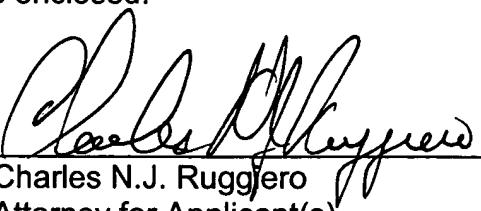
The total fee for this amendment, including claim changes and any extension of time is calculated to be \$ 0.

A check in the amount of \$ \_\_\_\_ is attached.

The Commissioner is hereby authorized to charge any additional fees under 37 C.F.R. §§1.16 and 1.17 which may be required with this communication or during the entire pendency of the application, or credit any overpayment, to **Deposit Account No. 01-0467**. A duplicate copy of this Form is enclosed.

December 6, 2005

Date

  
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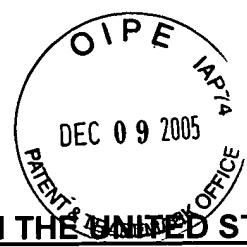
**CERTIFICATE OF MAILING**

I HEREBY CERTIFY THAT THIS CORRESPONDENCE IS BEING DEPOSITED WITH THE U.S. POSTAL SERVICE AS FIRST CLASS MAIL IN AN ENVELOPE ADDRESSED TO: MAIL STOP AF, COMMISSIONER FOR PATENTS, P.O. BOX 1450, ALEXANDRIA, VA 22313-1450, ON December 6, 2005.

Joanne A. Romaniello  
NAME

  
SIGNATURE

12/6/05  
DATE



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Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**REQUEST FOR RECONSIDERATION**

Dear Sir:

In response to a Final Office Action mailed on October 6, 2005, Applicants respectfully request reconsideration of the above application in view of the remarks set forth herein.

**Claim Listing** begins on page 2 of this paper.

**Remarks/Arguments** begin on page 9 of this paper.